



DEPARTMENT OF HEALTH & HUMAN SERVICES

SEP - 4 2009

Food and Drug Administration
10903 New Hampshire Avenue
Document Mail Center - WO66-G609
Silver Spring, MD 20993-0002

Ms. Nurul Aisyah Kong Bt Abdullah
Quality Assurance Manager
Hartalega Sdn. Bhd.
No. 7 Kawasan Perusahaan Suria
Bestari Jaya, Selangor 45600
MALAYSIA

Re: K091652

Trade/Device Name: Nitrile Powder Free Examination Gloves (Blue) Tested for use
with Chemotherapy Drugs - VBLU
Nitrile Powder Free Examination Gloves (Blue) Tested for use
with Chemotherapy Drugs - ABLU
Blue Powder Free Nitrile Examination Gloves (Tested for use
with Chemotherapy Drugs) - CBLU

Regulation Number: 21 CFR 880.6250

Regulation Name: Patient Examination Glove

Regulatory Class: I

Product Code: LZA, LZC

Dated: August 12, 2009

Received: August 18, 2009

Dear Ms. Kong:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

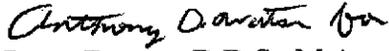
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Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,


Susan Runner, D.D.S., M.A.
Acting Division Director
Division of Anesthesiology, General Hospital,
Infection Control and Dental Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosures

Indication For Use

510(k) Number (if known) : K091652

Device Name :

Nitrile Powder Free Examination Gloves (Blue) Tested for use with Chemotherapy Drugs -VBLU

Indications For Use :

The nitrile examination gloves (Tested for use with Chemotherapy Drugs) is a disposable device intended for medical and dental purposes that is worn on the examiner's hand to prevent contamination between patient and examiner. The list of chemotherapy drugs tested (with breakthrough times) are as below:

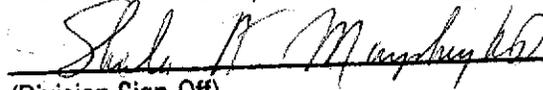
Chemotherapy Drugs	Breakthrough Time (Minutes)
1. Carmustine	6.60
2. Cisplatin	> 240
3. Cyclophosphamide (Cytosan)	> 240
4. Dacarbazine	> 240
5. Doxorubicin Hydrochloride	> 240
6. Etoposide	> 240
7. Fluorouracil	> 240
8. Methotrexate	> 240
9. Mitomycin	> 240
10. Paclitaxel	> 240
11. Thiotepa	14.83
12. Vincristine Sulfate	> 240

"WARNING: Do not use with Carmustine and Thiotepa."

Prescription Use _____ AND/OR Over-The-Counter Use x
(Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)



(Division Sign-Off)

Division of Anesthesiology, General Hospital
Infection Control, Dental Devices

510(k) Number: K091652

Indication For Use

510(k) Number (if known) : K091652

Device Name :

Nitrile Powder Free Examination Gloves (Blue) Tested for use with Chemotherapy Drugs -ABLU

Indications For Use :

The nitrile examination gloves (Tested for use with Chemotherapy Drugs) is a disposable device intended for medical and dental purposes that is worn on the examiner's hand to prevent contamination between patient and examiner. The list of chemotherapy drugs tested (with breakthrough times) are as below:

Chemotherapy Drugs	Breakthrough Time (Minutes)
1. Carmustine	35.80
2. Cisplatin	> 240
3. Cyclophosphamide (Cytosan)	> 240
4. Dacarbazine	> 240
5. Doxorubicin Hydrochloride	> 240
6. Etoposide	> 240
7. Fluorouracil	> 240
8. Methotrexate	> 240
9. Mitomycin	> 240
10. Paclitaxel	> 240
11. Thiotepa	85.48
12. Vincristine Sulfate	> 240

“CAUTION: Testing showed an average breakthrough time of 35.80 minutes with Carmustine.”

Prescription Use _____ AND/OR Over-The-Counter Use x
(Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

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